# City of Coquitlam Request for Approved Product Submission Form

#### **Engineering & Public Works**

3000 Guildford Way, Coquitlam BC V3B 7N2 Tel: 604-927-3500 Fax: 604-927-3505 Email: epw@coquitlam.ca

#### For new product submissions to the City of Coquitlam.

Coquitlam

Please provide requested information in the fields provided as this information will be used by the Evaluation Committee to assist in the review of the product use and application. Incomplete applications will be returned. A response for the product's submission will be issued upon receipt of application, initial appraisal, and committee result.

Supplier Information		
Supplier Name:		
Address:	City:	Postal Code:
Contact:	Email:	
Phone:	Fax:	
Manufacturer Information (if d	ifferent than supplier)	
Manufacturer Name:		
Address:	City:	Postal Code:
Contact:	Email:	
Phone:	Fax:	
Applicant Information		
Applicant Name:		
Email:	Phone:	
Product Information		
Product Name:		
Product Application Details (Describe	the product's application and/or use):	

Identify suitable Section from the MMCD Platinum Edition and the City's List of Approved Materials and Products:

#### A review WILL NOT be considered unless the following is provided:

- □ Product standards and specifications.
- □ List of references or end users with contact information.
- □ Product Certificate of Compliance (i.e. CSA, ASTM, ASWWA)

Documentation or letter describing:

□ The sustainability of the company, the product, and the manufacturing process.

□ A brief history of the product manufacturer.

□ A brief statement of why the product should be used by the City. How would the City benefit by using the product?

□ Maintenance requirements.

□ Training requirements, and/or special tools or equipment required.

□ Availability of the product and replacement parts.

**Provide all other information that you feel is relevant to assist the Committee to appraise this product's use?** (*Provide/Attach Details*):

Some criteria the Evaluation Committee uses to evaluate a product submission. Provide details that can support the Product's Function: Safety: Environmental: Durability: Life Cycle: Permanent Installation:

### Send completed submissions by email to epw@coquitlam.ca

## Application Status Office Use Only

Date Received:		MMCD Section:			
Product Name/Description	on:				
Initial Response (Reply/D	Discussion):				
Review Result (Advise Ap	oplicant) <b>:</b>				
Committee Result: 🗆 A	Accepted Use	□ Proven Use	□ Not Required	□ Rejected for Use	2
Notification (Advise Appl	licant):				
City Reviewer(s):				Da	te:
Comments:					